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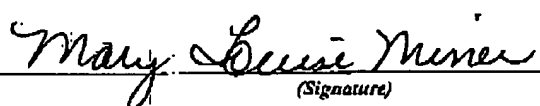
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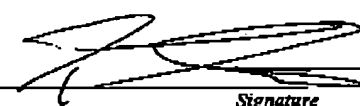
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PAGE 1/25 * RCVD AT 8/9/2006 6:16:32 PM [Eastern Daylight Time] * SVR:USPTO-EFXXRF-3/4 * DNIS:2738300 * CSID:801 578 6999 * DURATION (mm-ss):07:40

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CERTIFICATE OF TRANSMISSION BY FACSIMILE (37 CFR 1.8)			Docket No. 50588/44
Applicant(s): Paul G. Allen, et al			
Application No. 09/916,635	Filing Date 07/27/2001	Examiner Jean Wicel Desir	Group Art Unit 2614
Invention: REMOTE CONTROL DEVICE WITH INTEGRATED DISPLAY SCREEN FOR CONTROLLING A DIGITAL VIDEO RECORDER			
			RECEIVED CENTRAL FAX CENTER AUG 09 2006
I hereby certify that this _____ (Identify type of correspondence) *See documents listed below. is being facsimile transmitted to the United States Patent and Trademark Office (Fax. No. 571-273-8300 on August 9, 2006 (Date)			
Mary Louise Miner (Typed or Printed Name of Person Signing Certificate)			
 (Signature)			
Note: Each paper must have its own certificate of mailing. * Amendment (20 Page(s)) Request for Continued Examination (RCE) Transmittal (1 Page) Amendment Transmittal Letter (1 Page(s)) Credit Card Payment Form (1 page)			
Salt Lake 278453.1 0099999-00001			

P18/REV02

AMENDMENT TRANSMITTAL LETTER (Large Entity)					Docket No. 50588/44	
Applicant(s): Paul G. Allen, et al.						
Application No.	Filing Date	Examiner	Customer No.	Group Art Unit	Confirmation No.	
09/916,635	07/27/2001	Jean Wicel Desir	32641	2622	1204	
Invention: REMOTE CONTROL DEVICE WITH INTEGRATED DISPLAY SCREEN FOR CONTROLLING A DIGITAL VIDEO RECORDER						
COMMISSIONER FOR PATENTS					RECEIVED CENTRAL FAX CENTER AUG 09 2006	
Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.						
CLAIMS AS AMENDED						
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE	
TOTAL CLAIMS	47 -	54 =	0	x \$50.00	\$0.00	
INDEP. CLAIMS	6 -	6 =	0	x \$200.00	\$0.00	
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00	
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00	
<input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account 502375 <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input type="checkbox"/> Any patent application processing fees under 37 CFR 1.17. <input checked="" type="checkbox"/> Payment by credit card. Form PTO-2038. WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.						
 Signature			Dated: August 9, 2006			
Kory D. Christensen Attorney Registration No.: 43,548 STOEL RIVES, LLP 201 S. Main Street Suite 1100 Salt Lake City, Utah 84111 Telephone: (801) 328-3131 Facsimile: (801) 578-6999			I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on _____ (Date) _____ Signature of Person Mailing Correspondence _____ Typed or Printed Name of Person Mailing Correspondence			
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P11LARGE/REV10